

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

File with:

Iowa Ethics and Campaign
Disclosure Board
510 E. 12th, Ste. 1A
Des Moines, Iowa 50319
Fax: 515-281-4073

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed electronically.
Effective May 1, 2010, all statements and reports for State PACs and State Parties must be filed electronically.

IA ETHICS AND
CAMPAIGN DISCLOSURE B.
pm 6-2
2010 JUN -3 AM 8:40

Reset Form

COMMITTEE NAME (Must be same as on Statement of Organization)

Gaskill for State Representative

IMPORTANT: Indicate by # type of committee you are reporting for: ☐

(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political
Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:

Candidate Name

Mary Gaskill

Political Party (if applicable)

Democrat

Office Sought

State Representative

District (if Senate or House)

93

FORM

DR-2

(Rev. 12/2009)

DISCLOSURE
REPORT

For Office Use Only

Comm. # 1376

Logged In S

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Audited

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a candidate's committee, and the chairperson, for any other type of committee, is the individual responsible for filing timely and accurate reports.

Carolee Kern
SIGNATURE OF PERSON FILING REPORT

641-684-8235
TELEPHONE

6-1-10
DATE SIGNED

I AM FILING A 06/04/2010

(report date)

REPORT FOR (1) ELECTION (2) NON-ELECTION YEAR.

Indicate by # ☐

☐ CHECK IF AMENDMENT TO REPORT DATED

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

County & Local Committees, enter County in which Election is held

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

\$ 8,104.95

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)

1,070.00

Schedule F: Loans Received total (Attach Schedule F)

0.00

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

0.00

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL \$ 9,174.95

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)

~~342.15~~ 349.47

Schedule F: Loan Repayments total (Attach Schedule F)

0.00

CASH ON HAND at the end of this reporting period (if final report balance must be zero)

\$ ~~8,832.80~~ 8825.48

**UNPAID BILLS (From Schedule D - Attach Schedule D)

\$ 0.00

*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)

\$ 34.04

**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)

\$ 0.00

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES ☒ NO

CANDIDATE COMMITTEES ONLY:

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$ 0.00

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Gaskill for State Representative

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
05/20/2010	ID# CK# 3374	James H. Schwartz 107 E 2nd St Ottumwa, IA 52501	none	\$50.00	<input checked="" type="checkbox"/>
05/20/2010	ID# CK# 1910	Patricia L. Shaffer 416 Cory Dr Ottumwa, IA 52501	none	100.00	<input checked="" type="checkbox"/>
05/20/2010	ID# CK# 6968	Michael Mauro 4325 SW 31st St Des Moines, IA 50321	none	50.00	<input checked="" type="checkbox"/>
05/20/2010	ID# CK# 1707	Jennifer Hoskin 24769 RT V 56 Milton, IA 52570	none	30.00	<input checked="" type="checkbox"/>
05/20/2010	ID# CK# 3048	Mary Ann Reiter 401 N Green St Ottumwa, IA 52501	none	50.00	<input checked="" type="checkbox"/>
05/20/2010	ID# CK# 5119	Judith K. Beisch 2062 Great Oak Drive Ottumwa, IA 52501	none	50.00	<input checked="" type="checkbox"/>
05/20/2010	ID# CK#	Unitemized Contributions	none	215.00	<input checked="" type="checkbox"/>
05/20/2010	ID# CK# 18507	Donald D. Avenson 30 Maplewood Dr Oelwein, IA 50662	none	100.00	<input checked="" type="checkbox"/>
05/26/2010	ID# CK# 5997	Connie Jo Hammersly-Wilson 330 N Johnson Ottumwa, IA 52501	none	50.00	<input checked="" type="checkbox"/>
05/26/2010	ID# CK# 1241	William R. Woerner 300 Ivanhoe Road Waterloo, IA 50701	none	100.00	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 795.00	
TOTAL (if last page of this schedule)				\$	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

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(for Schedule A)

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONEY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Gaskill for State Representative

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
05/26/2010	ID# CK# 5789	John J Hennen 1 Oak Ridge Road Apt 202 Ottumwa, IA 52501	none	\$50.00	<input checked="" type="checkbox"/>
05/27/2010	ID# CK# 4808	Brenda S. Curran 1417 N Van Buren Ave Ottumwa, IA 52501	daughter	25.00	<input checked="" type="checkbox"/>
05/27/2010	ID# CK#	Unitemized Contributions	none	100.00	<input checked="" type="checkbox"/>
05/27/2010	ID# 6439 CK# 2055	CWA Council of State of Iowa Cope Fund 369 California St Waterloo, IA 50703	none	100.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 275.00	
TOTAL (if last page of this schedule)				\$ 1070.00	

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(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

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EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Gaskill for State Representative

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
05/22/2010	ID# CK# 1202	United State Postal Service 337 Church St Ottumwa, IA 52501	postage	\$ 44.00
05/22/2010	ID# CK# 1203	Adam Phillips 4307 Northwest Dr Des Moines, IA 50310	reimbursement of postage	88.00
05/24/2010	ID# CK# 1185	Wapello County Auditor 101 W 4th St Ottumwa, IA 52501	e mail List 2010	10.00
05/24/2010	ID# CK# 1186	Ottumwa Printing, Inc. 105 South Birch St Ottumwa, IA 52501	Yard Sign Wires	200.15
5/31/2010	ID# CK#	South OTTUMWA Savings 320 Church St. BANK OTTUMWA, IA 52501	BANK SERVICE Charge	7.32
	ID# CK#			
	ID# CK#			
	ID# CK#			

SUB-TOTAL

\$ 349.47

TOTAL (if last page of this schedule)

\$ 349.47

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

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(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Gaskill for State Representative

Reset Form

SCHEDULE E (Rev. 06/97)	IN-KIND CONTRIBUTIONS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
05/22/2010	Elaine Orr 186 Carter Ave Ottumwa, IA 52501	none	Food	\$ 12.01	<input checked="" type="checkbox"/>
05/17/2010	Mary Gaskill 509 E 4th St Ottumwa, IA 52501	self	Inkjet Refill	13.90	<input type="checkbox"/>
06/01/2010	Mary Gaskill 509 E 4th St Ottumwa, IA 52501	self	1/4 on line computer service 5/15/10 to 6/1/10	8.13	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
SUB-TOTAL				\$ 34.04	
TOTAL (If last page of this schedule)				\$ 34.04	

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

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(for Schedule E)